2007 LIMITED PARTNERSHIP ANNUAL REPORT (AR) DUE BY MAY 1, 2007

STAPLE

SIGNATURE:

FILED DOCUMENT # A15088 Feb 12, 2007 08:00 AM Secretary of State 1. Entity Namo ISLAND HARBOR BEACH CLUB, LTD. Principal Place of Business Mailing Address 7092 PLACIDA ROAD 7092 PLACIDA ROAD CAPE HAZE FL 33946 CAPE HAZE FL 33946 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suito, Apt, #, etc. Suite, Apt. #, etc 1st MOORE CR2E003 (10/06) City & State Applied For City & State 4. FEI Number 59-2388258 Not Applicable Ζıp 7in Country Country \$8.75 Additional 5. Certificate of Status Dosired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo BECKSTEAD, DEAN L Street Address (P.O. Box Number is Not Acceptable) 7092 PLACIDA ROAD CAPE HAZE FL 33946 Zip Codo 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title it applicable DATE FILE NOW!!! Fee is \$500. *** After May 1, 2007, fee will be \$900. *** Make check payable to Florida Department of State. A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner. 12. GENERAL PARTNER INFORMATION ADDRESS CHANGES ONLY DOCUMENT A 680541 STREET ADDRESS NAME CHARLOTTE HARBOR LAND CO STREET ADDRESS 7092 PLACIDA ROAD CHY-SI-7P U00000633136 CHY-SI-ZIP CAPE HAZE FL 02/21/07 00050 002 500.00 DOCUMENT # STREET ADDRESS NAMI STREET ADDRESS CHY-SI-ZIP CHY-ST-ZIP DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CITY-SI-7/P 0.FY ST 7:P **DOCUMENT** STREET ADDRESS STREET ADDRESS CHY-SI-7(P CITY-S1-ZIP DOCUMENT# STREET ADDRESS STREET ADDRESS CITY - S1- ZIP CHY-\$1-71P DOCUMENT # STREET ADDRESS NAME STREET ADDRESS CHY-SI-ZIP CITY-ST-7IP 14. I horeby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under eath, that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

DEAN L. BECKHEAD, PRESIDENT, CHARLOTTE HARBURLANDCO. INC. G

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER